## § 260.3

decision is made. Such notice shall include notification of the employee's right to reconsideration of the initial decision as provided in §260.3. For purposes of this section, a timely request to amend an employee's record of compensation maintained under the Railroad Retirement Act shall be filed within four years after the date on which the return of compensation was required to be made to the Board by the employee's employer. For purposes of this section, a timely request to amend an employee's record of compensation maintained under the Railroad Unemployment Insurance Act shall be filed within 18 months after the date on which the last return of compensation was required to be made covering any portion of the calendar year which includes the period during which the challenged payment was

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- § 260.3 Request for reconsideration of initial decision of the Bureau of Disability and Medicare Operations, Bureau of Retirement Benefits, Bureau of Survivor Benefits, Office of Retirement and Survivor Programs, or Bureau of Research and Employment Accounts.
- (a) Right to file requests for reconsideration. Every claimant shall have the right to file a request for reconsideration of an initial decision of the Bureau of Disability and Medicare Operations, Bureau of Retirement Benefits, Bureau of Survivor Benefits or Office of Retirement and Survivor Programs described in § 260.1(a) or an initial decision of the Bureau of Research and Employment Accounts described in § 260.2. Provided, however, That:
- (1) An individual under age 18 shall not have the right to reconsideration of a finding of incapacity to manage his or her annuity payments, but shall have the right to contest the finding that he or she is, in fact, under age 18;
- (2) An individual who has been adjudged legally incompetent shall not have the right to reconsideration of a finding of incapacity to manage his or her annuity payments, but shall have the right to contest the fact of his or her having been adjudged legally incompetent; and

- (3) An individual shall not have the right to reconsideration of a denial of his or her application to serve as representative payee on behalf of an annuitant. Such request for reconsideration shall be filed and disposed of in the manner prescribed in this section, except that a request for reconsideration of an initial erroneous payment decision under §260.1(a)(7) shall be filed and disposed of in the manner prescribed in §260.4.
- (b) Written request for reconsideration. A written request for reconsideration must be filed with the appropriate bureau within 60 days from the date upon which notice of the initial decision is mailed to the claimant. The claimant shall state the basis for the reconsideration request and provide any additional evidence which is available. No hearing will be provided by the bureau conducting the reconsideration.
- (c) Right to further review of initial decision. The right to further review of an initial decision of the Bureau of Disability and Medicare Operations, Bureau of Retirement Benefits, Bureau of Survivor Benefits, Office of Retirement and Survivor Programs or Bureau of Research and Employment Accounts shall be forfeited unless a written request for reconsideration is filed within the time period prescribed in this section or good cause is shown by the claimant for failing to file a timely request for reconsideration.
- (d) Timely request for reconsideration. In determining whether the claimant has good cause for failure to file a timely request for reconsideration the bureau director shall consider the circumstances which kept the claimant from filing the request on time and if any action by the Board misled the claimant. Examples of circumstances where good cause may exist include, but are not limited to:
- (1) A serious illness which prevented the claimant from contacting the Board in person, in writing, or through a friend, relative or other person;
- (2) A death or serious illness in the claimant's immediate family which prevented him or her from filing;
- (3) The destruction of important and relevant records;
- (4) A failure to be notified of a decision; or

- (5) An unusual or unavoidable circumstance existed which demonstrates that the claimant would not have known of the need to file timely or which prevented the claimant from filing in a timely manner.
- (e) Impartial review. The reconsideration of the initial decision shall be conducted by a person who shall not have any interest in the parties or in the outcome of the proceedings, shall not have directly participated in the initial decision which has been requested to be reconsidered and shall not have any other interest in the matter which might prevent a fair and impartial decision.
- (f) *Timely review*. The director of the bureau to whom a request for reconsideration is directed shall make every effort to issue a decision upon reconsideration and send a copy of the decision to the claimant within 60 days of the date that the request for reconsideration is filed.
- (g) Right to appeal adverse decision. If the reconsideration decision is adverse to the claimant, annuitant or payee, he or she shall be notifed of his or her right to appeal the decision to the Bureau of Hearings and Appeals, as provided in §260.5.

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- § 260.4 Request for waiver of recovery of an erroneous payment and/or for reconsideration of an initial erroneous payment decision of the Bureau of Disability and Medicare Operations, Bureau of Retirement Benefits, Bureau of Survivor Benefits or Office of Retirement and Survivor Programs.
- (a) General. A beneficiary who has been determined to have received an erroneous payment under §260.1(a)(7) shall have the right, upon the filing of a timely request in accordance with the requirements of this section, to request waiver of recovery of the erroneous payment and/or reconsideration of the erroneous payment decision. The beneficiary shall have the right to an informal oral hearing on the issue of waiver of recovery and/or reconsideration of the erroneous payment decision of the erroneous payment decision.

- sion, before an employee of the Board designated to conduct such a hearing, prior to commencement of recovery by suspension or reduction of a monthly benefit.
- (b) Request for waiver of recovery and/ or reconsideration of an erroneous payment decision and for an oral hearing. A request for waiver of recovery and/or reconsideration of an erroneous payment decision and for an oral hearing under this section shall be in writing and addressed to the district office of the Board set forth in the initial decision letter or to the Director of the bureau or office which issued the erroneous payment decision. The request must be received by either the appropriate district office or the Director of the bureau or office which issued the erroneous payment decision within 30 calendar days from the date on which notice of the erroneous payment decision was sent to the beneficiary. The beneficiary shall state in the request whether he or she elects to have an oral hearing. If the beneficiary does not elect to have an oral hearing with respect to his or her request for waiver of recovery or for reconsideration of the erroneous payment decision, he or she may, along with the request, submit any evidence and argument which he or she would like to present in support of his or her case.
- (c) Right to further review of an initial erroneous payment decision. The right to further review of an initial erroneous payment decision of the Bureau of Disability and Medicare Operations, Bureau of Retirement Benefits, Bureau of Survivor Benefits or Office of Retirement and Survivor Programs shall be forfeited unless a written request for reconsideration is filed within the time period prescribed in this section or good cause is shown by the beneficiary for failing to file a timely request for reconsideration. Good cause for failure to file a timely request shall be determined by the Director of the bureau or office which issued the erroneous payment decision in the manner described in §260.3(d).
- (d) Delay in the commencement of recovery of erroneous payment. Where a